

STANDARD FORM 52

PROMULGATED BY THE
U. S. CIVIL SERVICE COMMISSION
JANUARY 1957 - FEDERAL PERSONNEL
MANUAL CHAPTER RI

Approved For Release 2000/05/08 : CIA-RDP78-04718A001100140017-8

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) James A. Garrison		2. DATE OF BIRTH 11/2/03	3. REQUEST NO.	4. DATE OF REQUEST 24 Sept 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Change of Title		6. EFFECTIVE DATE A. PROPOSED:		7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.) Change Organizational Designation and also Change title of position R 900		B. APPROVED:		
FROM— Chief of Logistics R 900 GS-18 Logistics Office Washington, D. C.		8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	TO— Assistant Director for Logistics GS-18 R 900 Office of Logistics Washington, D. C.	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title)

D. REQUEST APPROVED BY

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

Signature: _____

Title: **Deputy Director (Administration)**

13. VETERAN PREFERENCE

NONE	WWII	OTHER	5-PT.	10-POINT	
				DISAB.	OTHER

14. POSITION CLASSIFICATION ACTION

NEW	VICE	I. A.	REAL.

15. SEX

16. RACE

17. APPROPRIATION

FROM:

TO:

18. SUBJECT TO C. S.
RETIREMENT ACT
(YES—NO)19. DATE OF APPOINT-
MENT AFFIDAVITS
(ACCESSIONS ONLY)

20. LEGAL RESIDENCE

☐ CLAIMED ☐ PROVED
STATE:

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY

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23. RESIGNATION

I RESIGN FOR THE FOLLOWING REASON _____

DATE _____

MY LAST WORKING DAY WILL BE _____

(SIGNATURE)

24. SEPARATION DATA

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS:

(STREET)

(CITY)

(ZONE)

(STATE)

BRIEF DESCRIPTION OF DUTIES

QUALIFICATIONS

EDUCATION

Essential:

Desired:

(If pertinent)

AGE RANGE _____

SEX _____

ESSENTIAL QUALIFICATIONS (Experience, Skills, Languages, Area Knowledge, etc.)

DESIRED QUALIFICATIONS (Experience, Skills, Languages, Area Knowledge, etc.)